have allotted not Rs. 3. 8 crores but through reappropriatioji during my recent rip to Madras I have announced ano-er Rs. 3. 4 crores. So, the total is Rs. 7. 2 crores. There are hundreds of lines for which work has to be undertaken throughout India and this particular project has been allotted 7. 2 per cent of the entire allocation for new lines. So, I do not think it is that meagre amount considering the circumstances and we will continue doing our best.

SHRI M. KADHARSHA; Sir, the hon. Minister has stated that Rs. 7. 2 crores have been allocated for this project. I will put a very simple question, when was this allocation made? I learn that this allocation was made on 27th March, just before the closing of the financial year. If the al'oeation is made at the, fag end of the financial year, how do you think the money can be utilized? That shows there is some disinclination on the part of the Government to complete the project. They have already spent Rs. 33 crores and if the project is not completed within time there will be cost escalation and this amount will again be insufficient for the project. So, I want a categorical reply, by when the project will be com-. pleted.

SHRI MADHAVRAO SCINDIA: ST, I am referring to the financial year 1986-87, when I am ta'king of allocation of Rs. 7. 2 crores. The date mentioned by the hon. Member—27th March—is probably of 1985. He is talking about the previous financial year. I am talking of allocation in this particular financial year.

MR. CHAIRMAN: Next question.

Trafficking ip live human organs

*224. SHRI GURUDAS DAS GUPTA:

SHRI N. E. BALARAM: *

Will the Minister of HEALTH AND FAMILY be pleased to state:

The question wa. s actually asked on the floor of the House by Shri N. E. Balaram

(a) whether it is a fact that trafficking in l ve human organs has become a thriving business in the country and a few hospitals in Bombay are involved in buy- ing and selling of kidneys for West Asian buyers;

(b) whether the Indian Medical Asso- ciation's attention has been drawn to this business by some Kuwaiti doctors; and

(c) if so, what are the details thereof and the reaction of Government thereto?

THE MINISTER OF STATE IN THE DEPARTMENT OF HEALTH IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) Government have come across reports alleging trading in live human organs in the country. However no definite information is avil-able abou the extent of this trading and the institutions or individuals involved in such operations. Some time back the Indian Medical Association had received a general complaint in this regard from the Faculty of Medicine, Kuwait University. The Indian Medical Association, in its turn had issued an appeal to all its members not to indulge in such trading in live human organs. The relevant legal aad ethical issues are proposed to be examined by the Government in consultation with experts.

SHRI N. E. BALARAM; Sir, I am very sorry to say that the Government has not viewed this matter very seriously because in the statement the hon. Minister has already stated that the Govern^ ment have come across reports alleging trading in live human organs in the country; however no definite information is available. I do not know what sort of investigation was conducted by the Government. This matter was extensively reported in the press. Now this has become a thriving, business in Bombay. Some papers like the Hindu have written a write-up in which it has been definitely stated which are the institutions that are doing this business. But the Minis-

ter in her reply says that Government has no idea about it. What is the fun of it? What the Government has done in this matter.

SHRI P. V. NARAS1MHA RAO: Sir, we have not said, we have no idea about it- The first report c'ame in July. Within the last four months we have been trying our best to get at the truth. Members will appreciate that the hospitals in Bombay arc not run by me. I cannot straightway order an enquiry. We had to write to the Government of Maharashtra. The report from the Government of Maharashtra says that they, in turn, have asked the hospitals in Bombay -which are doing kindney transplant to tell them what the position is, so that, in turn, they could tell us. The report of the Government of Maharashtra says that except Jaslok Hospital, no other hospital has yet reported to them. This is the position, Sir. But the Government of Maharashtra have also hinted, without of course going into details because they could not go into details until they get the reports from the hospitals or order an enquiry *suo moto* themselves, that there seems to some truth—considerable truth—in this allegation that at lea. st two hospitals in Bombay are indulging in this. So we are trying to get at the truth. Government of Maharashtra are doing all that they can. So I don't think we are taking it non-seriously. Thi$_s$ is not only a matter of medical ethics, it is also a matter of general level of economic $_{co}$ndition$_s$ in the country. There are lots of other ingredients in this. So we will have to go into the medico-legal and other ethical aspects. The Director General Health Services has called for a very detailed examination of these matters at a workshop next month and I hope that after all the experts in different fields come and have their say, we will be able to decide what to do.

I may also add that as the law stands today, if a person wants to donate a part of his body—what is called a paired part— if he has two eyes and if he wants to donate one to live on the other all his life—I don't think he is prohibited, from doing so. Therefore, we will have to go into the legal questions also. It is serious matter: we are taking it seriously.

SHRI N. E- B ALAR AM; Am I to understand that the Government has no power over the private institutions that are working in India, especially the medical institutions, because a large number of such institutions are coming up like mushrooms in several parts of the country and doing this sort of business? Am I to understand that you have not any control over these things? If that is the position, the Government should seriously think about making some legislation.

SHRI P. V. NARASIMHA RAO: Sir, we are looking into the position and we are also looking into what is to be done to correct the position. How much control do we have over the institutions, how much control does the State Government have over the institutions, all these things would have to be gone Into. This racket—I am afraid it is developing into a racket—if it i$_s$ to be curbed, all aspects of the matter would have to be gine into. They have not been gone into because it has come to light only recently. I would like to assure the Members that the Government, in all respects, matches the seriousness of the honourable Members.

PROF. C. LAKSHMANNA: Mr. Chairman, Sir, while answering to Mi nister has stated that the donors have the right to donate one of the limbs where there is a paired limb. However, he has not made it clear whether this donation is for the hospital or the hospital in turn can draw upon the same clause and send it elsewhere. Therefore, I would like the Minister to categorically state as to how long he will take to come forward with a definite statement that this will be curbed in six months' time, three months' time or five months' time. I would like to have a categorical assurance from the Minister that he will come forward with a statement that this type of trading in limbs wili be stopped and even if there is a provision legally existing for the donation

of one of the limbs where there is a paired limb, it will not come in the way of implementing such a policy.

SHRI P. V. NARASIMHA RAO: Sir, I wish this question had been repeated in all the State Legislatures of India because it is there that the answers would come.

PROF. C. LAKSHMANNA: The Minister is having that machinery and that right even to communicate.

SHRI P. V. NARASIMHA RAO: I do not have the right. That is what I am trying to explain, that I can't compel, I cannot order an inquiry myself. If it had been any of the hospitals running under me, I would have done it and come with final results already. The point is, we realize the seriousness of the matter. Having realized it, we will have to consult the State Governments, consult not only Bombay but others also because, maybe in some other places also this is being done. For the information of the honourable Member I would like to say that if a kidney transplantation is made on a patient, taking a kidney from one of his relations, it is allowed. There is nothing wrong in it. It is being done in all the big hospitals where the expertise is available. The question is not donation from related donor. The question is donation from an unrelated donor who wants to part with a limb of his body because he is poor or because he is avaricious and says "I have got two, I can do with one, why don't you save another individual by giving one from me?" Now there is a humanitarian aspect also but, in his heart of hearts there is a financial aspect also. So, all these things would have to be gone into. I cannot possibly say that I will do it within three months or six months. I would like to come to you. beg of you, to have a discussion in the House; I would like to consult the Members. I would not like to be always at the answering end. I would like to take some suggestions also from the Members. Let us go into all the aspects that are involved in this.

SHRIMATI RENUKA CHOWDHURY: Sir, the Minister says that he cannot prevent a man from donating but I would like to ask him whether we cannot curb irregular traffic like this by preventing people from advertising for donation of organs. That could be the first positive step that you could take to prevent private people from advertising and saying that there will be suitable remuneration paid, which is the pattern that is being utilized in order to contact people,. Why we are not encouraging kidney banks—like eye banks—which is being done abroad but we haven't reached those proportions in India. Perhaps we should encourage people to donate their bodies to science because, after you are dead and epne it does n°t matter what happens to your body when at least somebody is going to live. So, if this kind of message is propagated, perhaps we should be able to stop irregular trafficking in limbs.

SHRI P. V. NARASIMHA RAO: I agree with the hon. Member, Sir. This is where a line is to be drawn. If you take a part of the body of a person who is just dead, what is called, cadaverous kidney, that has to be removed immediate'/ after his death, within one hour, as eye is removed. So, all this will have to be arranged for, which is not available at the moment in the conutry. And people are not really fully motivated to do that. No relation, no wife, no husband, no son would, by himself, voluntarily say, "All right, immediately after my father dies Or my husband dies, his kidney may be removed. " That kind of thing would have to be brought about by constant education and motivation. So, there are so many things involved, as. I said, and I entirely agree that this will have to be taken up seriously in all its aspects.

MR. CHAIRMAN; There was one question about prevention of the advertisements.

SHRI P. V. NARASIMHA RAO; Yes, Sir. It is a fact that before these moral questions were, thrown up, advertisements were given in the newspapers

so as **to** facilitate the donor and the receiver coming to some terms on meeting each other. In fact, I am told that there have been some Indian films actually eulogising and glorifying this kind of trade or exchange of limbs. There is a different complexion now. All this cannot be extolled. It will have to be subject to so many other restrictions, and it will have to be taken in a very balanced light. So. all these things would have *to* be looked into. Advertisements will have to be banned, if necessary, or modified or made a vehicle of our own education. So, all this will have to be done.

SHRI A. G. KULKARNI: Sir. the Minister has rightly bifurcated the two aspects of the basic question. One is humanitarian, and the other is commercial exploitation. In Bombay we have come across the callous conditions in the big hospitals. Particularly, Sir, in blood donation, even bad quality of blood is being encouraged *to* be given for a consideration. Then, Sir, the other is the organs. And the third is substandard medicine also. Sir, the substandard medicine has resulted in a large number of deaths of poor people in the government hospitals. Apart from the ethics of this profession, this commercial character has been, you know, the bane of this entire service organisation. This rarely goes towards serving human beings. And I do feel that *it* starts from the commercial aspect of admission to the medical colleges itself, but I will not go into that question. I want *to* know from you whether, instead of going into a legislation which will take a long time, w© can make the Indian Medical Council responsible, and then they will be responsible for such doctors and such organisations as are indulging in the exploitary character of the poverty of a person.

SHRI P. V. NARASIMHA RAO: Sir, the Indian Medical Council has an Act i which governs its functioning. That will | have to be amended if we come to the conclusion that certain legislative measures are necessary. I do not think that anything can be done by anyone without legislative support. That will have to be done. It will take some time. We are going into all these aspects.

SHRI JAGESH DESAI; Mr. Chairman, if I have heard him correctly, the hon. Minister said that two hospitals in Maharashtra were found trafficking in live organs. What are the names of the hospitals and whether the State Government has taken any steps with regard to these two hospitals?

SHRI P. V. NARASIMHA RAO: Sir, the State Government, according to my information, advisedly, have no named those hospitals yet. Evidently, they are going into all the aspects, all the details, facts, etc. When they tell us. I will be able to divulge the names. But right now we have not heard the names from the State Government. We should bear with State Government because they are cooperating. They are doing their best.

Model railway stations

*225. SHRI SATYA PRAKASH MALAVIYA: t SHRI J. P. GOYAL:

Will the Minister of RAILWAYS be pleased to state;

(a) whether there is a proposal under Government's consideration to establish model railway stations in the country;

(b) if so, what are the details in regard thereto;

(c) what are the names of railway stations selected in Uttar Pradesh for being converted into model railway stations;

(d) what is the amount earmarked for the purpose; and

(e) when the work of establishing model railway stations is likely to be started and completed?

fThe question was actually asked on the floor of the House by Shri Satya **pra-**kash Malaviya.